



The Tennessee Open Meetings Act passed by the General Assembly in 1974 requires that meetings of state, city and county government bodies be open to the public and that any such governmental body give adequate public notice of such meeting.

**TENNESSEE DEPARTMENT OF HEALTH
MEMORANDUM**

Date: April 5, 2018

To: Shelley Walker, Director of Communication and Media Relations

From: Wanda E. Hines, Board Administrator

Name of Board or Committee: Board for Licensing Health Care Facilities-Facilities
Construction Standing Committee Meeting
(Call-in Number: 1-888-757-2790 passcode: 152602#)

Date of Meeting: May 7, 2018

Time: 9:00 a.m., CDT

Place: Poplar Conference Room
665 Mainstream Drive, First Floor
Nashville, TN 37243

Major Item(s) on Agenda: See attachment.

This memo shall be forwarded from individual programs to the Public Information Office on the 15th day of the preceding month. The Public Information Office will prepare the monthly list of meetings within the Department and have ready for distribution to state media by the 28th day of the preceding month.



JOHN J. DREYZEHNER, MD, MPH
COMMISSIONER

BILL HASLAM
GOVERNOR

*THE MISSION OF THE TENNESSEE DEPARTMENT OF HEALTH IS TO PROTECT, PROMOTE AND IMPROVE
THE HEALTH AND PROSPERITY OF PEOPLE IN TENNESSEE*

AGENDA

**BOARD FOR LICENSING HEALTH CARE FACILITIES
FACILITIES CONSTRUCTION STANDING COMMITTEE MEETING**

**MAY 7, 2018
POPLAR CONFERENCE ROOM, FIRST FLOOR
9:00 a.m.**

**PLEASE REMEMBER TO SILENCE YOUR ELECTRONIC DEVICES WHEN
THE BOARD IS IN SESSION**

1. Call the Meeting to Order and Establish a Quorum.
2. **SOUTHERN TENNESSEE REGIONAL HEALTH SYSTEM-PULASKI, PULASKI**
This ninety-five (95) bed hospital facility is seeking to waive building code 2.1-2.4.3 which requires a seclusion room for short-term occupancy. Their psychiatric unit is a geriatric unit where they do not use seclusion with this population of patients and never used the dedicated seclusion room since the unit opened in 1996. The intention of this waiver is to use this room to better meet the needs of the population served in the geriatric psychiatric setting.
REPRESENTATIVE(S): Jim Edmondson, FACHE, Chief Executive Officer
3. Other Discussion(s).
4. Public Comments.
5. Adjourn.